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PTO/SB/30 (10-01)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Commission for Patents
Box RCE
Washington, DC 20231

Application Number	10/758,114
Filing Date	January 16, 2004
First Named Inventor	SUZUKI
Art Unit	2152
Examiner Name	Tariq S. Najee-Ullah
Attorney Docket Number	HITA.0495

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plan application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114**

a. ☐ Previously submitted

- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed _____
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____

b. ☒ Enclosed

- i. ☒ Response/Preliminary Amendment
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Petition for _-month Extension of Time

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other

3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge any additional fees, or credit any overpayments to Deposit Account No. 08-1480
 - i. ☒ RCE fee required under 37 CFR 1.17(e)
 - ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17)
 - iii. ☒ Other Excess claims fee
- b. ☒ A check in the amount of \$810.00 for the RCE fee, is enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed).

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Juan Carlos A. Marquez	Registration NO. (attorney/agent)	34,072
Name (Print/Type)	Stanley P. Fisher	Registration NO. (attorney/agent)	24,344
Signature		Date	September 16, 2008

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the United States and Trademark Office on the date shown below.

Name (Print/Type)		Date	
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

09/17/2008 MAHMED1 00000011 10758114

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810.00 OP



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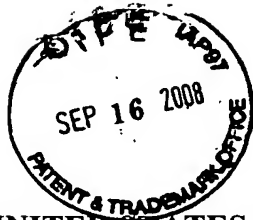
Name (Print/Type)	Juan Carlos A. Marquez	Registration NO. (attorney/agent)	34,072
Name (Print/Type)	Stanley P. Ejsker	Registration NO. (attorney/agent)	24,344
Signature		Date	September 16, 2008

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

SUZUKI et al.

Application Number: 10/758,114

Filed: January 16, 2004

For: NETWORK CONTROL METHOD AND EQUIPMENT

ATTORNEY DOCKET NO. HITA.0495

Art Unit 2152

Examiner

NAJEE-ULLAH, TARIQ S.

Commissioner of Patents

P.O. Box 1450

Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	15	15	(Over 20)	x \$50	0
Independent Claims	4	4	² (Over 3)	x \$210	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$370	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
				TOTAL	0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

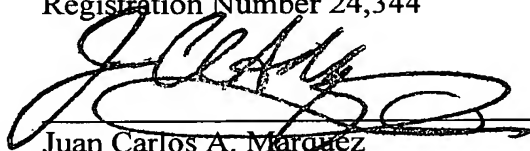
- [x] Response/Preliminary Amendment
(with Claim Amendments)
[] Preliminary Amendment
[] Substitute Specification
[] Other _____

- [] Petition for __-month Extension of Time
[] Terminal Disclaimer
[] Letter to Draftsperson
[] ___ sheet of drawings
[x] Request for Continued Examination

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] A check in the amount of **\$810.00** for the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344



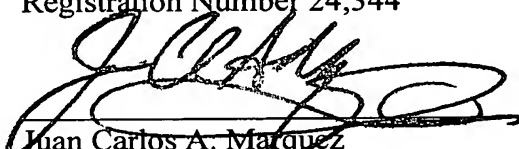
Juan Carlos A. Marquez
Registration Number 34,072

REED SMITH LLP
3110 Fairview Park Drive, Suite 1400
Falls Church, Virginia 22042
(703) 641-4200
September 16, 2008

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] A check in the amount of **\$810.00** for the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
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Falls Church, Virginia 22042
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September 16, 2008